



Children's Law Center **of Los Angeles**

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STATEMENT SUBMITTED TO THE CALIFORNIA PERFORMANCE REVIEW COMMITTEE

by

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I appreciate your solicitation of stakeholder views in relation to the CPR report and recommendations. It is our hope that this will be the first step in a longer process that will engage advocates and others in consideration, revision and implementation of these new approaches.

The Children's Law Center of Los Angeles ("CLC") is a nonprofit, public interest law corporation created over a decade ago and funded by the Los Angeles Superior Court to serve as appointed counsel for abused and neglected youth in one of the largest foster care systems in the nation. CLC's dedicated attorneys and staff serve as the "voice" in the foster care system for the vast majority of the 30,000 children under the jurisdiction of the Los Angeles County dependency court and advocate for the critical services and support these children so desperately need. On a broader organizational level, CLC strives to identify areas where systemic reforms are needed and has worked effectively locally and statewide to bring about those more far-reaching changes. Given our organization's status as the largest representative of foster youth in California, if not the nation, we are uniquely positioned to help propel important changes in the foster care system.

We applaud the thoughtful work memorialized in the CPR and share the general aims underlying many of the recommendations -- ensuring an accountable child welfare system that most effectively enables services and assistance to reach children and families in need. We look forward to opportunities to contribute to the development of detailed recommendations that further these objectives. We are confident that enhanced collaboration will bring about positive change for children at risk in our state.

We are well aware that the next steps in assessing and implementing the CPR are critical and likely to be fast moving. Many of the recommendations suggest positive and long overdue changes, but they lack crucial details that will ultimately determine their efficacy. It is our hope that any effort to fill out these details will include significant opportunity for proactive participation and input by stakeholders and other interested parties.

Our comments in regard to specific parts of the report that relate to the child welfare system are set forth below. We welcome the opportunity to provide additional input over time.

A. HHS 02

This proposal suggests realigning child welfare services (CWS) to the counties. Consolidating services could create more opportunity for local oversight and flexibility and also enhance direct accountability. All are worthy concepts.

HHS 02 assumes that savings captured from moving the responsibility for Medically Indigent Adult health coverage to the state will cover the increased costs to the counties of the proposed realignment. Regardless of any specifics, funding must be adequate and certain to ensure program maintenance.

We are also concerned, however, that the CPR suggests the creation of a working group to finalize a detailed plan that does not include stakeholders, advocates, or other critical parties that should be part of the process. As noted above, we urge stakeholder inclusion in any further creation, discussion and analysis of a specific plan.

Finally, the CPR does not clarify the interplay between this recommendation and HHS 08 – the proposal to create a single state department or official responsible for overseeing foster care.

B. HHS 06

This proposal recommends that the responsibility for foster care criminal background checks be placed with the state. In our view, this recommendation has merit and could lead to efficiencies in regard to a cumbersome and often time-consuming process. It would be unfortunate, however, if any centralization of this process were to lead to a usurping of local authority to grant exemptions and waivers that facilitate placements in individual cases, and often with appropriate and supportive relatives who are more likely to offer a permanent anchor for youth. Moreover, the narrow focus of this recommendation does not address other areas of concern associated with expediting foster youth placement. For example, mechanisms for provisional placement of youth with appropriate relatives and speeding up the approval process overall are critical and should be addressed.

C. HHS 08

This proposal recommends creating a department or position to provide leadership for foster care programs. The idea of consolidated leadership has many benefits, some of which are identified in the CPR. We embrace this change. However, the proposed September 1, 2004 implementation date raises concerns. As documented

in the CPR, this is a complicated system that extracts a great human cost when it fails. Changes to this system should be carefully considered and potential impacts need to be examined.

In addition, the notion of one designated agency or individual responsible for providing foster care leadership will not, alone, ensure the needed coordination and collaboration between the many departments involved in providing services and impacting the lives of youth in foster care. For example, the provision of education services for foster youth will still remain outside the Health & Human Services Department, but collaboration between the two departments is essential for foster youth. It may make sense to look at additional vehicles for collaboration, including (by way of example) the “Children’s Cabinet” created recently in Arizona and aimed at bringing Cabinet level leaders, Department heads, advocacy leaders, and judicial heads together to jointly address barriers and craft solutions in regard to the challenges facing foster youth.

The CPR also recommends that appropriate agencies create an assessment tool by July 1, 2005. We again stress that this process should involve stakeholders!

D. HHS 09

This proposal makes a series of recommendations that seek to further the important objective of increasing adoptions for foster youth. We support these efforts, but don’t believe that adoption is the sole road to permanence. We encourage consideration of the broader issue of enhancing permanence for foster youth, including strategies for incentivizing, promoting, and supporting guardianships and reunification.

Similarly, we embrace the acknowledgment in the CPR of the importance of enhanced public awareness, but believe again that improved awareness and forging a public commitment to the youth we collectively “parent” needs to extend beyond simply the issue of recruiting adoptive placements. Efforts such as the “Foster Care Awareness Campaign” held in Los Angeles this past May should be encouraged and replicated throughout the state.

My thanks, again, for affording me the opportunity on behalf of the Children’s Law Center and the thousands of young clients we represent to offer my perspectives in regard to ways California can better serve our neediest and most vulnerable children. These are the children of our community and our future. They deserve our very best efforts.